

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

**COPY**  
**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

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CITY OF BALDWIN PARK  
CITY CLERK'S DEPARTMENT

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Garcia Marlen

**1. Office, Agency, or Court**

Agency Name

City of Baldwin Park

Division, Board, Department, District, if applicable

Your Position

City Council

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Foothill Transit

Position: Board Member

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☒ County of Los Angeles

☒ City of Baldwin Park

☐ Other

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I have used all reasonable diligence in preparing this statement. I have reviewed herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California

Date Signed 3/31/2011  
(month, day, year)

Signature

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**

Name MARLEN GARCIA

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		
_____		
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
_____	<input type="checkbox"/> Real Property _____	
HIGHEST BALANCE DURING REPORTING PERIOD	_____ Street address	
<input type="checkbox"/> \$500 - \$1,000	_____ City	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Other _____	
<input type="checkbox"/> OVER \$100,000	(Describe)	

FPPC Form 700 (2010/2011) Sch. C  
FPPC Toll-Free Helpline: 866/275-3772 [www.fppc.ca.gov](http://www.fppc.ca.gov)

**SCHEDULE D**  
**Income – Gifts**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>MARLEN GARCIA</u>
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► NAME OF SOURCE  
WASTE MANAGEMENT

ADDRESS (Business Address Acceptable) B.P., CA  
13940 E. LIVE OAK AVE., 91706

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
WASTE HAULER

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02/18/10</u>	<u>75.00</u>	<u>Dinner</u>
<u>05/12/10</u>	<u>75.00</u>	<u>Dinner</u>
<u>07/09/10</u>	<u>75.00</u>	<u>Dinner</u>
<u>08/24/10</u>	<u>75.00</u>	<u>Dinner</u>

► NAME OF SOURCE  
SUPERIOR GROCERS

ADDRESS (Business Address Acceptable) SANTA FE SPRINGS, CA  
15510 CARMENITA RD. 90670

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
SUPER MARKET/GROCERS

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03/10/2010</u>	<u>75.00</u>	<u>Dinner</u>
<u>06/01/10</u>	<u>75.00</u>	<u>Dinner</u>

► NAME OF SOURCE  
DELTERRA

ADDRESS (Business Address Acceptable) CITY OF INDUSTRY  
13181 CROSSROADS PKWY. No., STE 200

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CONSTRUCTION MANAGEMENT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02/09/10</u>	<u>75.00</u>	<u>Dinner</u>
<u>03/29/10</u>	<u>25.00</u>	<u>Dinner</u>
<u>09/13/10</u>	<u>30.00</u>	<u>Dinner</u>

► NAME OF SOURCE  
The Afriat CONSULTING GROUP, INC.

ADDRESS (Business Address Acceptable) BURBANK, CA  
4107 MAGNOLIA BLVD.,

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
CONSULTANTS, BUSINESS REDEVELOPMENT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01/18/10</u>	<u>30.00</u>	<u>Dinner</u>
<u>04/22/10</u>	<u>50.00</u>	<u>Dinner</u>

► NAME OF SOURCE  
MAYER & NAVE LAW FIRM

ADDRESS (Business Address Acceptable) PROFESSIONAL LAW CORPORATION

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
LEGAL/ATTORNEY SERVICES

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03/04/10</u>	<u>50.00</u>	<u>Dinner</u>
<u>03/18/10</u>	<u>50.00</u>	<u>Dinner</u>

► NAME OF SOURCE  
AKESHIRE & WYNDER, LLP

ADDRESS (Business Address Acceptable) GARDENA, CA  
1515 W. 190TH ST., STE. 505 90248

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
LEGAL/ATTORNEY SERVICES

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09/16/10</u>	<u>59.11</u>	<u>Dinner</u>

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**

Name

Marlen Garcia

► NAME OF SOURCE  
VEOLIA TRANSPORTATION, INC.  
ADDRESS (Business Address Acceptable)  
720 E. BUTTERFIELD RD, STE. 300,  
BUSINESS ACTIVITY, IF ANY, OF SOURCE LOMBARD, IL  
PUBLIC TRANSPORTATION 60148

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04, -, 10</u>	<u>\$ 60.00</u>	<u>Tickets (2) to Covina</u>
<u>          </u>	<u>          </u>	<u>Playhouse Play</u>
<u>          </u>	<u>          </u>	<u>Nonsense</u>

► NAME OF SOURCE  
AAE INCORPORATED  
ADDRESS (Business Address Acceptable) BREA, CA  
601 S. VALENCIA AVE, STE. 250 92823  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
ENGINEERING & GENERAL CITY SVCS.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4, 19, 10</u>	<u>\$ 30.00</u>	<u>Dinner</u>
<u>10, 27, 10</u>	<u>\$ 30.00</u>	<u>Dinner</u>
<u>          </u>	<u>          </u>	<u>          </u>

► NAME OF SOURCE  
LAW OFFICE OF OLIVAREZ & HOGAN  
ADDRESS (Business Address Acceptable)  
424 N. LAKE AVE., PASADENA, CA 91101  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
LEGAL/ATTORNEY SERVICES

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9, 29, 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>
<u>          </u>	<u>          </u>	<u>          </u>
<u>          </u>	<u>          </u>	<u>          </u>

► NAME OF SOURCE  
D.C. CORPORATION  
ADDRESS (Business Address Acceptable)  
1773 W. SAN BERNARDINO RD, STE. B42 West Covina 91791  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
HOUSING DEVELOPMENT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04, -, 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>
<u>09, -, 10</u>	<u>\$ 50.00</u>	<u>Dinner</u>
<u>12, -, 10</u>	<u>\$ 100.00</u>	<u>Gift Basket</u>

► NAME OF SOURCE  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>      /      /      </u>	<u>\$</u>	<u>          </u>
<u>      /      /      </u>	<u>\$</u>	<u>          </u>
<u>      /      /      </u>	<u>\$</u>	<u>          </u>

► NAME OF SOURCE  
\_\_\_\_\_  
ADDRESS (Business Address Acceptable)  
\_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>      /      /      </u>	<u>\$</u>	<u>          </u>
<u>      /      /      </u>	<u>\$</u>	<u>          </u>
<u>      /      /      </u>	<u>\$</u>	<u>          </u>

Comments: \_\_\_\_\_